PATENT	APPLICATION	SERIAL	NO.	•	

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

CA/16/2004 AIBRANIN 00000001 194972 10797901

01 FC:1001 02 FC:1202 770.00 DA 90.00 DA

PTO-1556 (5/87)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10797901

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
			(Column 1)		(Column 2)		TYPE	TYPE		OR	SMALL	
TOTAL CLAIMS		25 _		•		RA	ΓΕ	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS) 5 minus 20= *		·	>	xs	9=	·	OR	X\$18=	90
INDEPENDENT CLAIMS			3 minus 3 = *			X43	3=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+14:	5=		OR	+290=	·
* If the difference in column 1 is less than zero, enter "0" in column 2				column 2	TOT	AL		OR	TOTAL	860		
CLAIMS AS AMENDED - PART II OTHER THAN												
(Column 1)					(Column 3)	SMALL ENTITY			OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9)=	*	OR	X\$18=	
AME	Independent	*	Minus	***		=	X43	=		OR	X86=	
	FIRST PRESE	NTATION OF MI	JUTIPLE DEF	PENDENT	CLAIM		+145	=		OR	+290=	
								TAL			TOTAL	
		(Oak		(Calum	- 0\	(Cal 0)	ADDIT.	EE		JON,	ADDIT. FEE	
		(Column 1) CLAIMS	_	(Colum HIGHE		(Column 3)		- 1	ADDI-	1	· ·	ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	USLY	PRESENT EXTRA	RAT	E	TIONAL FEE		RATE	ADDI- TIONAL FEE
LDME	Total	*	Minus _.	**		= .	X\$ 9	=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X43:			OR	X86=	
٥	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT (CLAIM		1	+	•			
							+145			OR	+290=	
							TO ¹ ADDIT, F			OR	TOTAL ADDIT, FEE	
		(Column 1)	·	(Colum	n 2)	(Column 3)					•	•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	##		=	X\$ 9:	=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X43=	1		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT (CLAIM			\dashv		~'' 		
+145= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												